



Request to Host Event and Availability of Date

Office Use:

Today's Date:

I. PERSON SUBMITTING REQUEST

Submitted By: _____
Please Type or Print Your Name

NZCF Ministry sponsoring the event: _____

Contact Number () - E-Mail: _____

II. GENERAL INFORMATION ABOUT EVENT

Date(s) Requested: AND **or** THRU Time: From _____ To _____
Circle one

Type of Event: _____ (Examples: Workshop, Fund Raiser, Banquet, etc.)

Briefly describe the event or provide the purpose: _____

(Example: The Senior's Ministry plan to sale dinners to raise funds to repair the women's wash room.)

III. GENERAL QUESTIONS ABOUT THE EVENT

1. Who can attend or participate? _____

2. Is there a charge to attend? Yes No If yes, how much \$ _____

3. Please provide the name(s) of any guest speaker, lecturer, teacher, etc.:

4. Are there any expenses to host the event? Yes No If yes, identify the expense and amount:

_____ \$ _____

_____ \$ _____

_____ \$ _____

PLEASE BE ADVISED THAT ALL EXPENSES IDENTIFIED HEREIN ARE THE RESPONSIBILITY OF THE MINISTRY SPONSORING THE EVENT OR THE PERSON SUBMITTING THIS FORM TO AC UNLESS PRIOR WRITTEN APPROVAL HAS BEEN OBTAINED FROM THE ELDERS' COMMITTEE.

5. Please identify the area(s) of the NZCC you are requesting for the event. Check all boxes that apply.

The Market Place Main Sanctuary Teens' Church

Narthex Genesis Center NZCF Suites

Other (specify) _____